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FROM: Charles D. Holland

DATE: October 25, 2005

Number of pages with cover page:	18
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Comments: RESPONSE TO NON-FINAL OFFICE ACTION

DOCKET NO.: 282172000810

GROUP ART UNIT: 1631

EXAMINER: M. Miller

SERIAL NO.: 09/872,384

FILING DATE: June 1, 2001

INVENTOR(S): Derek J. Hei

TITLE: METHODS AND DEVICES FOR THE REMOVAL OF PSORALENS FROM BLOOD  
PRODUCTS

## Papers attached:

1. Transmittal (1 page)
2. Fee Transmittal w/duplicate copy for fee processing (2 pages)
3. Petition for Extension of Time (1 page)
4. Amendment/Response (13 pages)

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TRANSMITTAL  
FORM

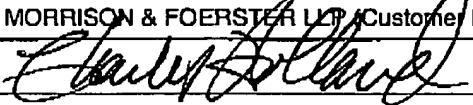
(to be used for all correspondence after initial filing)

		Application Number	09/872,384
		Filing Date	June 1, 2001
		First Named Inventor	Derek J. HEI
		Art Unit	1631
		Examiner Name	M. Miller
Total Number of Pages in This Submission	17	Attorney Docket Number	282172000810

## ENCLOSURES (Check all that apply)

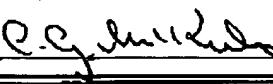
<input checked="" type="checkbox"/> Fee Transmittal Form + duplicate for fee processing (2 pages)	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply (13 pages)	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request (1 page)	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
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<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application		Remarks
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.59		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	MORRISON & FOERSTER LLP (Customer No. 25226)		
Signature			
Printed name	Charles D. Holland		
Date	October 25, 2005	Reg. No.	35,196

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (571) 273-8300, on the date shown below.

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(Carolyn G. McKubre)

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PAGE 2/18 \* RCVD AT 10/25/2005 10:19:42 PM [Eastern Daylight Time] \* SVR:USPTO-EXRF-6/27 \* DNI:2738300 \* CSID:650 813 5993 \* DURATION (mm:ss):04:12

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<b>Effective on 12/08/2004.</b> <i>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</i>		<b>Complete if Known</b>	
<b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		Application Number	09/872,384
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	June 1, 2001
<b>TOTAL AMOUNT OF PAYMENT</b> (\$ 450.00)		First Named Inventor	Derek J. HEI
		Examiner Name	M. Miller
		Art Unit	1681
		Attorney Docket No.	282172000810

**METHOD OF PAYMENT** (check all that apply)

<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP				
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
<input checked="" type="checkbox"/> Charge fee(s) indicated below		<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
<input type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17		<input checked="" type="checkbox"/> Credit any overpayments		

**FEES CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues)

		Small Entity
Fee (\$)	Fee (\$)	
		50
		25
		200
		100
		360
		180

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	
24	- 25 = 0	x 50.00	= 0.00		
				Fee (\$)	Fee Paid (\$)
				360.00	0.00

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
2	- 3 = 0	x 200.00	= 0.00

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
	- 100 =	/50 (round up to a whole number) x		

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1252 Extension for response within second month

450.00

SUBMITTED BY			
Signature	Registration No. (Attorney/Agent)		Telephone (650) 813-5892
Name (Print/Type)	Charles D. Holland		Date October 25, 2005

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